Homebuyer/Homeowner Rehab Completion Report HOME Program

U.S. Department of Housing and Urban Development Office of Community Planning and Development

OMB Approval No. 2506-0171 (Exp. 03/31/2005)

| | | | | oropriate box: Submission | Revision | | |
|---|---------------------------------------|----------------|-------------|--|-----------|------------------------|--|
| Part A: Activity Information | | | | | | | |
| 1. Activity Number | 2. Name of Participant | | | 3. Participant's Tax ID N | Number | 4. CHDO Tax ID Number | |
| 5. Name & Phone Number of person | n completing this form | | (1) 1 | of Property (check one) -4 Single Family (3 Condominium (4 |) 🗌 Coope | rative actured Home | |
| Part B: Financial Structure of | Activity | | | | | | |
| Type of Activity Financed (check on (1) ☐ Rehabilitation Only (3) ☐ New Construction Only (4) | e):) | (5) ☐ Acqu | isition & N | lew Construction | | | |
| Activity Costs 1. HOME Funds | | | | | | | |
| (1) Direct Loan | | Annual Interes | | Amortization Period Yrs. | \$ | | |
| (2) Grant | | | | | \$ | | |
| (3) Deferred Payment Lo | oan (DPL) | Annual Interes | | Amortization Period Yrs. | \$ | | |
| (4) Community Housing a. TA Loan | CHDO) Loan | | | \$ | | | |
| b. Seed Loan | | | | | \$ | | |
| Total CHDO Loan (Total Items 4a and 4b) | | | | | | | |
| (5) Other | | | | | \$ | | |
| Total HOME Funds (To | tal Items 1-5) | | | | \$ | | |
| 2. Public Funds | | | | | | | |
| (1) Other Federal Funds | i | | | | \$ | | |
| (2) State/Local Appropri | (2) State/Local Appropriated Funds | | | | \$ | \$ | |
| (3) State/Local Tax Exer | mpt Bond Proceeds | | | | \$ | \$ | |
| Total Public Funds (To | Total Public Funds (Total Items 1-3) | | | | \$ | | |
| 3. Private Funds | | | | | | | |
| (1) Private Loan Funds | | Annual Interes | | Amortization Period Yrs. | \$ | | |
| (2) Owner Cash Contrib | ution | | | | \$ | | |
| (3) Private Grants | | | | | \$ | | |
| Total Private Funds (To | Total Private Funds (Total Items 1-3) | | | | \$ | | |
| | | | | | | | |
| 4. HOME Program Inc | come | | | | \$ | | |
| | | | | | | | |
| 5. Total Activity Cos | ts (Total All Items) | | | | \$ | | |

| ilialiciai Assistalice to noille | buyer Note. | Complete for nome | ebuyer activities only. | |
|----------------------------------|---|--|---|--|
| Initial Purchase Price | \$ | | | |
| 2. Appraised Value | \$ | | | |
| | \$ | | | |
| (a) Direct Loan | Annual Interest Rate % | Amortization Period Yrs. | \$ | |
| (b) Grant | - | | \$ | |
| (c) Deferred Payment Loan | | | \$ | |
| (d) Other | | \$ | | |
| 4. HOME Program Income for Do | \$ | | | |
| 5. Total HOME Funds for Downpa | \$ | | | |
| complete for homeowner reha | abilitation activities | only. | | |
| After Rehabilitation Value | | | | \$ |
| 2. Single Family Mortgage Limit | | \$ | | |
| | 1. Initial Purchase Price 2. Appraised Value 3. Total HOME Funds for Downpa [sum of 3(a), 3(c), and 3(d)] (a) Direct Loan (b) Grant (c) Deferred Payment Loan (d) Other 4. HOME Program Income for Downpa 5. Total HOME Funds for Downpa Complete for homeowner rehamants. | 1. Initial Purchase Price 2. Appraised Value 3. Total HOME Funds for Downpayment Assistance [sum of 3(a), 3(c), and 3(d)] (a) Direct Loan Annual Interest Rate % (b) Grant (c) Deferred Payment Loan (d) Other 4. HOME Program Income for Downpayment Assistance (Item Complete for homeowner rehabilitation activities 1. After Rehabilitation Value | 1. Initial Purchase Price 2. Appraised Value 3. Total HOME Funds for Downpayment Assistance [sum of 3(a), 3(c), and 3(d)] (a) Direct Loan Annual Interest Rate Amortization Period Yrs. (b) Grant (c) Deferred Payment Loan (d) Other 4. HOME Program Income for Downpayment Assistance 5. Total HOME Funds for Downpayment Assistance (Items 3-4) Complete for homeowner rehabilitation activities only. 1. After Rehabilitation Value | 1. Initial Purchase Price 2. Appraised Value 3. Total HOME Funds for Downpayment Assistance [sum of 3(a), 3(c), and 3(d)] (a) Direct Loan Annual Interest Rate Amortization Period Yrs. (b) Grant \$ (c) Deferred Payment Loan \$ (d) Other \$ 4. HOME Program Income for Downpayment Assistance 5. Total HOME Funds for Downpayment Assistance (Items 3-4) Complete for homeowner rehabilitation activities only. 1. After Rehabilitation Value |

Part E: Household Characteristics. Complete the first line for the unit to be occupied by an owner. Fill out the second (third/fourth) line(s) for the rental unit(s), if any. For an unoccupied unit, enter unit number, number of bedrooms, and 9 for occupancy.

| _ine(s) for the rental unit(s), if any. For an unoccupied unit, enter unit number, number of bedrooms, and 9 for occupancy. | | | | | | | |
|---|------------------|-----------------|--|--|--|--|--|
| | Activity Address | Activity Number | | | | | |
| | | | | | | | |
| | | | | | | | |

| Unit No. | No. of Bedrooms | Occupancy | Tenant Contribution | Subsidy Amount | Total Rent | % of Area Median | Hispanic | Race-Head of Household | Size of Household | Head of Household | Rental Assistance |
|-------------|--|---------------------------------|------------------------|-------------------|---------------|---|---------------|--|---|---|--|
| | 0-SRO 1-1Bdrm 2-2Bdrm 3-3Bdrm 4-4Bdrom 5-5 or more Bdrms | 1-Tenant 2-Owner 3-Vacant | | | | 1-0-30% 2-30-50% 3-50-60% 4-60-80% | y-yes n-no | 11-White 12-Black/ AfricanAmerican 13-Asian 14-American Indian/ AlaskaNative 15-Native Hawaiian/Other Pacific Islander 16-American Indian/Alaska Native & White 17-Asian & White 18-Black/ AfricanAmerican & White 19-American Indian/Alaska Native & Black/ AfricanAmerican Co-Other Multi Racial | 1-1 Person 2-2 Persons 3-3 Persons 4-4 Persons 5-5 Persons 6-6 Persons 7-7 Persons 8-8 or more Persons | 1-Single/ NonElderly 2-Elderly 3-Related/ SingleParent 4-Related/ Parent 5-Other | 1-Section 8 2-HOME TBA 3-Other Assistance 4-No Assistance |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

The HOME statute imposes a significant number of data collection and reporting requirements. This includes information on assisted properties, on the owner or tenants of the properties, and on other programmatic areas. The information will be used: 1) to assist HOME participants in managing their programs; 2) to track performance of participants in meeting fund commitment and disbursement deadlines; 3) to permit HUD to determine whether each participant meets the HOME statutory income targeting and affordability requirements; and 4) to permit HUD to determine compliance with other statutory and regulatory program requirements. This data collection is authorized under Title II of the Cranston-Gonzalez National Affordable Housing Act or related authorities. Access to Federal grant funds is contingent on the reporting of certain activity-specific elements. Records of information collected will be maintained by the recipients of the assistance. Information on activities and disbursements of grant funds is public information and is generally available for disclosure. Recipients are responsible for ensuring confidentially when public disclosure is not required.

Instructions for Completing the Homebuyer/Homeowner Rehabilitation Completion Report HOME Program

Read the instructions for each item carefully before completing the form. Use a typewriter or print carefully with a ballpoint pen. Prepare an original and one copy. Retain the copy.

Applicability. This report is to be completed for each homeowner occupied single-family activity assisted with HOME funds. It is to be used for an activity with one owner occupant and zero to 3 units. **Note:** Completion of an activity with two or more homeowners should be reported on the Multi-Address Completion Report. Such an activity would also include 2 duplex properties each occupied by a homeowner but where the 2 properties are considered one project.

Timing. The Homebuyer/Homeowner Rehab Completion Report data are to be input in IDIS within **120 days** of requesting the final disbursement of HOME funds for the activity. If the completion report data are not input within 120 days of the final disbursement for the activity, the PJ's (or State Recipient's) access to the HOME IDIS System may be suspended. An amended completion report should be submitted when all units initially reported vacant are occupied, and the change should be highlighted in yellow.

Part A: Activity Information

- Activity Number. Enter the activity number assigned by IDIS.
- Name of Participant. Enter the name of the participant, or, for State recipient activities, the name of the State recipient
- Participant's Tax ID Number. Enter the Tax (Employer) Identification Number for the participant; for a State recipient project, enter the State recipient's Tax ID Number.
- 4. CHDO Tax ID Number. Complete only for activities assisted with funds reserved for Community Housing Development Organizations (CHDOs). Enter the Tax (Employer) Identification Number for the CHDO.
- Name & Phone Number of Person Completing Form.
 Enter the name and phone number, including area code, of the person to contact for further information regarding this report form.
- 6. Type of Property. Check one box to indicate the type of property assisted:
 - (1) 1-4 Single Family
 - (2) Condominium
 - (3) Cooperative
 - (4) Manufactured Home

Part B: Financial Structure of Activity

Type of Activity Financed. Mark only one of the 5 available boxes for naming the HOME-assisted activity.

(1) **Rehabilitation Only.** A HOME-assisted rehabilitation activity that did not include acquisition of real property. Such activities may

- have involved (a) repairs or improvement of residential unit(s) to bring the unit(s) up to the property standards required by 24 CFR 92.251;(b) the reconfiguration of a structure to reduce the total units in order to increase the number of large family units, (c) the addition of a room or rooms (e.g., bedroom or bathroom) outside the existing walls for purposes of meeting occupancy or code standards and (d) the adding of a unit or units within the existing structure.
- (2) New Construction Only. Any activity that involved (a) the addition of units outside the existing walls of the structure and (b) the construction of a new residential unit(s). Note: When activities have combined new construction in one building(s) on one parcel of land, the projects, by type of activity (i.e. rehabilitation or new construction), must be administratively set up as separate activities in IDIS
- (3) Acquisition Only. Acquisition of a structure that received a certificate of occupancy at least 13 months before acquisition, which did not require rehabilitation and which is being used to provide affordable housing.
- (4) Acquisition and Rehabilitation. A HOMEassisted rehabilitation activity, which included the acquisition of real property.
- (5) Acquisition and New Construction. A HOME-assisted new construction activity, which included the acquisition of real property. This includes acquisition of a structure that has received an initial certificate of occupancy within a one-year period prior to acquisition.

Activity Costs. Include all HOME funds used for the activity and all other funds (public and private) with one exception. Do not double count. If private funds are used for construction financing and those funds are later replaced by permanent financing, do not report both. Report all HOME funds expended on the activity. (Note: Federal regulations specifically prohibit paying back **HOME funds with HOME funds.)** For funds other than HOME, to the extent a choice must be made to avoid double counting, report permanent financing rather than construction financing. The total amount reported on line 5 of Part B should be the total cost of the activity. The total amount of HOME funds reported in the block titled "Total HOME funds (Total Items (1)-(5)" of Part B must equal the total amount disbursed through IDIS for this activity.

1. **HOME Funds.** Include HOME program income on line 4, below, title "HOME Program Income" only. Do not

include HOME program income in any of the following 5 HOME categories.

- (1) Direct Loan. Enter the amount of HOME funds provided for this activity in the form of a direct loan. Enter the loan's interest rate and amortization period. If there are multiple loans, enter the interest rate and term of the largest loan.
- (2) Grant. Enter the amount of HOME funds provided without any repayment requirements. (Note: A grant may be used to reduce the principal amount borrowed, a principal reduction payment, or the effective interest rate, an interest subsidy payment, on a privately originated loan.)
- (3) Deferred Payment Loan (DPL). Enter the amount of HOME funds provided through loans where payment of principal and interest is deferred until a future time and enter the interest rate and amortization period, if any. A DPL is some times called a conditional grant (e.g., repayment is required when the property is sold, or is forgiven if the owner does not sell the property for a specified number of years or repayment of principal and interest starts after the bank loan is repaid.)
- (4) Community Housing Development Organization (CHDO) Loan.
 - a. Technical Assistance (TA) Loan. Enter the amount of HOME funds provided as a CHDO TA loan for the activity. Reference 24 CFR 92.301(a).
 - b. Seed Money Loan. Enter the amount of HOME funds provided as a CHDO seed loan. Reference 24 CFR 92.301(b).

Total CHDO Loan. Enter the total of the amounts entered on cited on 4a and 4b.

(5) Other. Enter the total amount of HOME funds provided for subsidy funding that is other than the type of loan/grant assistance identified in the above items listed as (1) through (4).

Total HOME Funds. Enter the total of items (1) through (5) as the amount of HOME funds expended.

- **2. Public Funds.** Enter in blocks (1) through (3), the total amount of public funds expended.
 - (1) Other Federal Funds. Exclude any HOME funds expended.
 - (2) State/Local Appropriated Funds.
 - (3) State/Local Tax Exempt Bond Proceeds.

Total Public Funds. Enter the total of items (1) through (3) as the amount of Public Funds expended.

- 3. Private Funds.
 - (1) Private Loan Funds. Enter the amount of all of the costs that have been paid with funds obtained from private financial institutions, such as banks, savings and loans, and credit unions, and enter the interest rate and amortization period of the loan. If there are multiple loans, enter the interest rate and term of the largest loan. (Do not double count.)
 - (2) Owner Cash Contributions. Enter the amount of all cash contributions provided by the project owner

- (3) Private Grants. Enter the amount of cash contributions provided by private organizations, foundations, donors, etc.
- **(4) Total Private Funds.** Enter the total of items (1) through (4) as the amount of Private Funds expended.
- **4. HOME Program Income.** Enter the total amount of funds provided from HOME repayment income.
- Total Activity Cost. Enter the sum of totals for HOME funds, Public funds and Private funds, Low Income Tax Credit Syndication Proceeds, and HOME Program Income. (Totals from above lines 1 through 5.)

Part C. Financial Assistance to Homebuyer.

Complete Part C for homebuyer activities only.

- Initial Purchase Price. Enter the price paid by the homebuyer for the property as evidenced on the deed.
- Appraised Value. Enter the estimated appraised value after any repair.
- 3. HOME Funds for Downpayment Assistance. Enter the amount of HOME Program funds, if any, provided as downpayment assistance to the homebuyer according to the following 4 categories:

(**Note:** Do not include HOME funds provided as construction financing. HOME funds provided as construction financing should be reported in Part B of this form). For definitions of the four categories, refer to the description of HOME funds in Part B.

- (a) Direct Loan
- (b) Grant
- (c) Deferred Payment Loan
- (d) Other
- **4. HOME Program Income.** Enter the amount of HOME Program income provided as downpayment assistance to the homebuyer only. **Note:** Do not double count.
- 5. Total HOME Funds for Downpayment Assistance. Enter the amount of HOME Program funds provided as downpayment assistance to the homebuyer (items 3 and 4).

Part D. Homeownership Rehabilitation Activities Only.

The information requested below pertains only to those activities that have been checked in Part B of this form as rehabilitation only or as acquisition and rehabilitation.

- After Rehabilitation Value. Enter the dollar value of the property. The dollar value is the appraised value of the property before rehabilitation plus the total rehabilitation cost (i.e. all materials, supplies and labor costs directly related to the rehabilitation of the property).
- 2. Single Family Mortgage Limit. Enter the applicable section 203(b) FHA mortgage limit. If a higher limit has been authorized for HOME for your jurisdiction, enter that higher limit.

Part E. Household Characteristics.

Complete one line for the unit to be occupied by an owner. Fill out the second (third/fourth) line(s) for the rental unit(s), if any. For an unoccupied unit, enter unit number, number of bedrooms and occupancy as 9 vacant.

Activity Address & Activity Number. Enter the address (or if no unique street, address, the unit number) of the HOME-assisted property. Also enter the activity number assigned by IDIS. This number should be the same as that entered in Part A, Block #1.

Unit Number. Enter the unit number of each unit assisted with HOME funds.

Number of Bedrooms. Enter "0" for a single room occupancy (SRO) unit or for an efficiency unit, 1 for 1 bedroom, 2 for 2 bedrooms, 3 for 3 bedrooms, 4 for 4 bedrooms, and 5 for 5 or more bedrooms.

Occupancy Code. Enter 1 if the unit is occupied by a tenant, 2 if it is occupied by a homeowner, and 9 if it is vacant.

Monthly Rent (Including Utilities).

Tenant Contribution. For homeowners, enter zero. For tenants, enter the actual rent to the nearest dollar, including utilities, paid by the tenant at the time of activity completion. If the rent includes utilities, or if the rent includes partial utilities, e.g., heat, but not electricity, these utility costs must be added to the rent. Compute utility costs for the area (and in the case of partial utilities, compute costs for utilities excluded from the rent), by using the utility allowance schedule by the local Public Housing Authority (PHA) in accordance with form HUD-52667, Allowance for Tenant Furnished Utilities and Other Services.

Subsidy Amount. For homeowners, enter zero. For tenants, enter the amount that the tenant receives as a rent subsidy payment (including any utility allowances paid directly to the tenant) to the nearest dollar. If the tenant does not receive a tenant subsidy payment, enter zero.

Total Rent. Enter the total monthly rent (tenant contribution plus subsidy amount).

Income Data.

Percent of Area Median. For each occupied residential unit, enter one code only based on the following definitions:

- 0-30 Percent of Area Median means a household whose adjusted income is at or below 30 percent of the median family income for the area, as determined by HUD with adjustments for smaller and larger families.
- 30-50 Percent of Area Median means a household whose adjusted income exceeds 30 percent and does not exceed 50 percent of the median family income for the area, as determined by HUD with adjustments for smaller and larger families.
- 50–60 Percent of Area Median means a household whose adjusted income exceeds 50 percent and does not exceed 60 percent of the median family income for the area, as determined by HUD with adjustments for smaller and larger families.
- 4. 60–80 Percent of Area Median means a household whose adjusted income exceeds 60 percent and does not exceed 80 percent of the median family income for the area, as determined by HUD with adjustments for smaller and larger families.

Household Data.

Hispanic Y/N: For each occupied residential unit, enter the ethnicity for the head of household as either "Y" for Hispanic or Latino or "N" for Not Hispanic or Latino. Hispanic or Latino race is defined as a person of Cuban, Mexican, Puerto Rican, South or Central American, other Spanish culture or origin, regardless of race.

Race – Head of Household: For each occupied residential unit, enter one code only based on the following definitions:

- **11. White.** A person having origins in any of the original peoples of Europe, North Africa or the Middle East.
- **12. Black/African American.** A person having origins in any of the black racial groups of Africa.

- 13. Asian. A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
- **14. American Indian/Alaska Native.** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains affiliation or community attachment.
- **15.** Native Hawaiian/Other Pacific Islander. A person having origins in any of the original people of Hawaii, Guam, Samoa or other Pacific Islands.
- American Indian/Alaska Native & White. A person having these multiple race heritages as defined above.
- Asian & White. A person having these multiple race heritages as defined above.
- **18. Black/African American & White.** A person having these multiple race heritages as defined above.
- 19. American Indian/Alaska Native & Black/African American. A person having these multiple race heritages as defined above.
- Other Multi Racial. For reporting individual responses that are not included in any of the other categories listed above.

Size of Household. Enter the appropriate number of persons in the household: 1, 2, 3, 4, 5, 6, 7, or 8 or more persons (for households or more than 8, enter 8).

Head of Household. For each residential unit, enter one code only based on the following definitions:

- Single/Non-Elderly. One-person household in which the person is not elderly.
- **2. Elderly.** One or two person household with a person at least 62 years of age.
- 3. Related/Single Parent. A single parent household with a dependent child or children (18 years old or younger).
- **4. Related/Two Parent**. A two-parent household with a dependent child or children (18 years old or younger).
- **5. Other.** Any household not included in the above 4 definitions, including two or more unrelated individuals.

Rental Assistance: Enter one code only to indicate the type of assistance, if any, being provided to the tenant.

- 1. Section 8. Tenants receiving Section 8 assistance through the Section 8 Certificate Program under 24 CFR part 882 or the Section 8 Housing Voucher Program under 24 CFR part 887.
- 2. HOME Tenant Based Rental Assistance. Tenants receiving HOME tenant-based assistance.
- Other Assistance. Tenants receiving rental assistance through other Federal, State or local rental assistance programs.
- 4. No Assistance. Self-explanatory.